(a) what is the percentage of expenditure in regard to money allotted to North Eastern Council in 1988-89 and 1989-90 upto May, 1989 ;

(b) whether it is a fact that the flow of expenditure is slow ; and

(c) if so, the reasons therefore ?

THE MINISTER OF PLANNING AND THE MINISTER OF PROGRAMME IMPLEMENTATION (SHRI MADHAVSINH SOLANKI) : (a) and (b) The anticipated expenditure percentage during 1988-89 of the North Eastern Council to the approved Annual Plan outlay of the year was 99.54 upto May, 1989, the percentage of anticipated expenditure to the proportionate annual approved outlay for the Annual Plan 1989-90, was 84.62. The percentage anticipated expenditure as given above shows that the flow of expenditure is not slow.

(c) Does not arise.

Money spent in Tripura during 1988-89, 1989-90

708. SHRI NARAYAN KAR : Will the Minister of PLANNING be pleased to state :

(a) percentage of plan money spent during the financial year 1988-89 and 1989-90 upto May, 1989 in Tirpura ; and

(b) whether it is a fact that the said plan money could not be spent fully, if so, the reasons therefor ?

THE MINISTER OF PLANNING AND THE MINISTER OF PROGRAMME IMPLEMENTATION (SHRI MADHAVSINH SOLANKI) : (a) and (b) The Tripura State Government has reported that the anticipated Plan expenditure during 1988-89 was 100% of the Plan outlay, and they have fully utilised the Plan money. The anticipated expenditure during the first quarter of 1989-90 is at about 24%.

Import of certain drugs

709. CHOWDHARY RAM SEWAK : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Ciprofloxacin, Testosterene, Atenolol, Danazole, Methacabamol, Aminophylline, Caffine and Cloxacillin Sodium are allowed for import in India ;

(b) if so, the quantity of each drug imported during the last two years, yearwise, alongwith their CIF value ;

(c) the names of the parties who imported these drugs alongwith the quantity imported by each ;

(d) what is the source of import of each and what are the names of supplies in each case ;

(e) whether any of these drugs are produced in India ; and

(f) if so, the names of those drugs ?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RAFIQUE ALAM) : (a) Yes, Sir.

(b) to (d) Information as available with this Ministry is given at Annexure-I. [*See* Appendix CLI, Annexure No. 57].

(e) and (f) The information is given in the statement given below.

Statement

Yes, Sir. Names of formulations based on these drugs produced in India are given below :—

1. Atenolol—	Atcardil, Aten, Betacard, Catenol, Dibeta, Presolar.
2. Ciprofloxacin—	Ciprolid, Cifran.
3. Testesterone—	Aquavirone B 12, Sustanon 100/250, Testanon 25/50, Testoviram/ Depot.
4 Danazol—	Danogen, Ladogel.
5. Methacarbamol—	Robinaxol
6. Aminophyllin—	Amidrin, Asmac, Daslin, Sedonol.
7. Caffine—	Apidin, Asmatone, Capramin, Ciltone, Topo.
8. Cloxacillin Sodium	Ampilox, Ampoxin, Bioclox, Klox, Novaclox,

Import of substandard drugs

710. SHRI CHANDRIKA PRASAD TRIPATHI : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a number of substandard drugs are being imported and dumped into India;

(b) if so, the names of the bulk drugs imported in the country from 1st January to 30th June, 1989;

(c) what is the source from which each drug was imported ;

(d) what are the names of drugs for which samples were drawn for test ;

(e) the names of the Laboratories where each sample was sent ;

(f) whether Government have received the text report of these samples ; and

(g) if so, the details thereof and the number of samples found to be of sub-standard quality ?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RAFIQUE ALAM) : (a) No, Sir. The drugs which are found to be of standard quality only are allowed to be imported into the country.

(b) and (c) Do not arise.

(d) to (g) The information is being collected and will be laid on the table of the Sabha.

Marketing of Albendazole and Fenbendazole

711. SHRI CHANDRIKA PRASAD TRIPATHI ; Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that Albendazole and Fenbendazole are allowed for marketing and human consumption in India ;

(b) what are the indication for which these drugs are used ;

(c) what is the composition, strength and form under which finished medicines of each has been allowed for marketing ;

(d) whether these drugs are allowed for import in the country ;

(e) if so, the quantity of each drug imported during the last three years, alongwith the CIF value and source of import;